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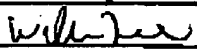
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/768,445	
	Filing Date	01/24/2001	
	First Named Inventor	HOUGHTON, Peter J.	
	Art Unit	1614	
	Examiner Name	Delacroix Muirheir, Cybille	
Total Number of Pages in This Submission	21	Attorney Docket Number	OC01128K

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
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<input checked="" type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Reply to Missing Parts/Incomplete Application	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		

Fax Cover Sheet - 1 Page
1 Reference included with filing

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm Name	Customer No: 24265
Signature	
Printed name	WILLIAM Y. LEE
Date	10/06/2005
Reg. No.	46,100

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Docket Number: OC01128K
Application No: 09/768,445
Filing Date: 01/24/2001
First Inventor: HOUGHTON, Peter J.

PTO/SB/97 (09-04)
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Response to Office Action - 10 Page

Petition for Extension of Time - 1 Page in duplicate

Information Disclosure Statement - 2 Pages

PTO/SB/08b - 1 Page

Fee Transmittal PTO/SB/17 - 1 Page in duplicate
1 Reference

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OCT 06 2005

SCHERING-PLOUGH CORPORATION
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2000 GALLOPING HILL ROAD
K-6-1, MAIL STOP 1990
KENILWORTH, NEW JERSEY 07033
(908) 298-4000

FACSIMILE TRANSMITTAL SHEET

TO: USPTO
Attention:
Examiner,
Delacroix Muirhe, Cybille

FAX NUMBER:
571-273-8300

FROM: William Lee

PHONE NUMBER:
(908) 298-2161

TOTAL NO. OF PAGES INCLUDING COVER
21

DATE
October 6, 2005

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NOTES/COMMENTS:

PLEASE HAND DELIVER TO THE EXAMINER

In re Application of: Houghton *et al.*
For Patent For: Combination Therapy for Cancer
Group Art Unit: 1614
Attorney Docket No.: OC01128K US/ Serial No.: 09/768,445
Filed: 01/24/2001

Dear Examiner:

Transmitted here with are:

- Fax Cover Sheet - 1 Page
- Certificate of Transmission PTO/SB/97 - 1 Page
- Response Transmittal PTO/SB/21 - 1 Page
- Response to Office Action - 10 Page
- Petition for Extension of Time (3 Months) PTO/SB/22 - 1 Page in duplicate
- Information Disclosure Statement - 2 Pages
- PTO/SB/08b - 1 Page
- Fee Transmittal PTO/SB/17 - 1 Page in duplicate
- 1 Reference

William Y. Lee
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DUPLICATE

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Effective on 12/08/2004.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).**FEE TRANSMITTAL
For FY 2005**☐ Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$) 180.00**Complete if Known**

Application Number 09/768,445
 Filing Date 01/24/2001
 First Named Inventor HOUGHTON, Peter J.
 Examiner Name Delacroix Muirhel, Cybille
 Art Unit 1614
 Attorney Docket No. OC01128K

METHOD OF PAYMENT (check all that apply)
☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify):

☒ Deposit Account Deposit Account Number 19-0365 Deposit Account Name: Schering-Plough Corporation

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FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100
Multiple dependent claims	360	180

Total Claims	Extra Claims	Fee (\$)	Fees Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fees Paid (\$)
- 20 or HP =	x	=				
HP = highest number of total claims paid for, if greater than 20						
Indep. Claims	Extra Claims	Fee (\$)	Fees Paid (\$)			
- 3 or HP =	x	=				
HP = highest number of independent claims paid for, if greater than 3						

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fees Paid (\$)
- 100 =	/ 50 =	(round up to a whole number) x		

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other: IDS Surcharge

180.00

SUBMITTED BY

Signature

Name (Print/Type) WILLIAM Y. LEE

Registration No.

(Attorney/Agent) 46,100

Telephone 908-298-2161

Date 10/06/2005

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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